

machine, comprising a rigid housing forming at least two independent lumens, said lumens comprising a first lumen and a second lumen each having a proximal and a distal end, wherein said fitting may be operatively attached to a multilumen proximal terminal having first and second ports at the distal end of third and fourth lumens so that, when said distal ends of said first and second lumens of said fitting are operatively attached to said first and second ports respectively the third lumen and said first lumen both form part of a first flow path that is independent of a second flow path that is formed at least in part by said second lumen and the fourth lumen, wherein said fitting is operatively detachable from a proximal terminal to which it is attachable by a user at a site of use.--

--14. The fitting of claim 13, wherein said first lumen is coaxial with said second lumen.--

--15. The fitting of claim 13, further comprising a filter in at least one of said first lumen and said second lumen.--

--16. The fitting of claim 14, further comprising at least one filter, wherein at least one of said at least one filter is positioned in at least one of said first lumen and said second lumen.--

--17. The fitting of claim 13, wherein said first and second lumens terminate at third and fourth distal ports and fifth and sixth proximal ports, wherein said proximal ports are co-axial.--

--18. A unilimb respiratory conduit for providing inspiratory gases to a patient and receiving expiratory gases therefrom, said respiratory conduit for use with a proximal terminal that has lumens defining inspiratory and expiratory flow paths that are independent of each other and converge at a distal end of the proximal terminal and diverge from each other proximally of the distal end of the proximal terminal so that the lumen defining the inspiratory flow path of the proximal terminal is independently operatively connectable to an inlet for a source of inspiratory gas while the lumen

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defining the expiratory flow path of the proximal terminal is independently operatively connectable to an expiratory outlet, said respiratory conduit comprising:

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a first lumen and a second lumen, said first and second lumens forming independent flow paths, said respiratory conduit having a distal end and a proximal end, wherein said distal end of said respiratory conduit is operatively connectable to and detachable from a patient by a user at a site of use, and said proximal end of said conduit is operatively connectable to and detachable from a proximal terminal by a user at a site of use,

wherein when said conduit is operatively connected to a proximal terminal, said first lumen is in fluid communication with the inspiratory flow path and said second lumen is in fluid communication with the expiratory flow path, wherein said first lumen is operatively connectable to an inlet for a source of inspiratory gas via the proximal terminal while said second lumen is operatively connectable to an expiratory outlet via the proximal terminal, wherein said respiratory conduit is operatively detachable from a proximal terminal after use therewith for independent disposal or sterilization.--

--19. A respiratory conduit interface device for operatively coupling a unilimb, multilumen flexible respiratory conduit of the type described in claim 18 to an anesthesia machine or respirator type device, comprising a rigid housing having first and second lumens defining respectively first and second flow paths therein, said first and second lumens being independent of each other and each having a distal end and a proximal end, said distal ends of said independent lumens converging at a distal end of said housing so as to be capable of simultaneous operative connection to a unilimb flexible respiratory conduit, and wherein said first and second flow paths in said housing diverge from each other proximally of said distal end of said housing so that said proximal end of said first lumen is independently operatively connectable to an inlet for a source of inspiratory gas while said proximal end of said second lumen is independently operatively connectable to an expiratory outlet, wherein a unilimb flexible respiratory conduit is operatively attachable to said housing for use and detachable therefrom after use for independent disposal or sterilization.--